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OBSERVATIONS
ON
THE STATE
OF THE
GLOCESTER INFIRMARY.

BY SIR G. O. PAUL.



OBSERVATIONS
ON
THE STATE
OF THE
GLOCESTER INFIRMARY,

AS REPORTED
BY THE COMMITTEE OF GOVERNORS APPOINTED TO
EXAMINE INTO THE INCOME AND
EXPENCES OF THE SAME;

AND,
ON THE PROPRIETY AND EXPEDIENCY

OF ADOPTING
THE REGULATIONS,
PROPOSED BY THE COMMITTEE, AND RECOMMENDED BY
THE QUARTERLY GENERAL COURT,

Held on the 6th of October;

OFFERED TO THE CONSIDERATION OF
THE SPECIAL GENERAL COURT,

Held on the 22d of November, 1796.

BY SIR G. O. PAUL.

PRINTED AND PUBLISHED AT THE SPECIAL REQUEST OF
THE PRESIDENT AND GOVERNORS PRESENT;
AND SOLD
FOR THE BENEFIT OF THE FUND OF THE INFIRMARY.

PRICE ONE SHILLING.

OBSERVATIONS

THE STATE

OF THE

GLOUCESTER DISTRICT

AS APPOINTED

BY THE COMMISSIONER OF THE LANDS AND
REVENUE TO THE HOUSE AND
REVENUE OF THE LANDS

ON THE PROPERTIES AND EXTENT

OF THE

THE RECORDS

RESPECTING THE COMMISSIONERS OF THE LANDS AND
REVENUE OF THE LANDS

THE QUARTERLY GENERAL COURT

Held on the 1st of October

IN THE YEAR OF OUR LORD ONE THOUSAND

THE QUARTERLY GENERAL COURT

Held on the 1st of November 1850

BY J. C. F. J. J.

PRINTED AND PUBLISHED BY THE GENERAL RECORDS OF

THE RECORDS AND QUARTERLY GENERAL COURT

AND

FOR THE RECORDS OF THE HOUSE OF THE LANDS

THE GENERAL RECORDS

PROCEEDINGS
ON
AN ENQUIRY
INTO
THE STATE
OF THE
GLOCESTER INFIRMARY.

GENERAL COURT,

JULY 15, 1796.

IT appearing to this Court, that the Expenditure of the last year greatly exceeded the Income of the Hospital,

RESOLVED,

THAT a Committee be appointed to examine into the State of the Infirmary, and the Expences and Income of the same, and to report the result of their enquiry at the next General Court;—and that the Committee do consist of the Gentlemen of the Faculty, and such other Governors as shall be pleased to attend.

GLOCESTER INFIRMARY.

OCTOBER 6, 1796.

AT a QUARTERLY GENERAL COURT of the GOVERNORS of the Gloucester Infirmary, held this day, a Report of the Committee, appointed by a Resolution of a GENERAL COURT held July the 15th, 1796, to examine into the State of the Infirmary, and the Expences and Income of the same, was read;

RESOLVED,

THAT IT APPEARS TO THIS COURT, That the Income arising to this Infirmary, during the year 1795, amounted,

	<i>l.</i>	<i>s.</i>	<i>d.</i>
From the Annual Subscriptions and Ar-			
rears thereof, to the sum of - - -	1017	8	0
From small Contributions, and other			
Contingencies, to - - - - -	51	19	4 $\frac{3}{4}$
From Interest of Money in the Funds,			
and other legal Securities, to - - -	565	0	0
	1634	7	4 $\frac{3}{4}$

THAT the Expences incurred during that year, exclusive of 51*l.* *os.* 2 $\frac{1}{2}$ *d.* for Extra Buildings and Furniture, amounted to - - - - - 2017 16 6

And that the Deficiency, occasioned by such Expences, was - - - - - £ 383 9 1 $\frac{3}{4}$

THAT the Infirmary has been conducted with the strictest Economy, in every article of Expence; and,—That the great Increase in the Expenditure is to be attributed to the

the extraordinary advance in the price of Drugs, and of every article of Housekeeping; which advance has been rendered peculiarly burthenfome, by an increase in the number of In-Patients, in the year 1795, beyond all former example, and beyond the provision of healthful accommodation.

THAT in the year 1793, the number of Patients, constantly upon the Weekly Diet List, did not amount to 100; that in 1795, it extended to 110; and during the first six months of the present year, it was not less than 116; and,—That the number of Beds, for the reception of Patients, does not exceed 110.

ORDERED,

THAT four Beds be always ready, in separate rooms, for the reception of such Patients as the Physicians may judge proper to be placed there, and six at least to receive persons brought in upon sudden accidents; that the remaining number of Beds be appropriated to the use of the other Patients; and that, when more persons are recommended for admission than this remaining number of Beds will contain, the Weekly Board be requested to enforce the 30th and 31st Rules for the Government of this Infirmary.

ORDERED,

THAT none but In-Patients be entitled to Trusses at the expence of the Infirmary, but that Out-Patients may receive the same upon paying for them.

RESOLVED,

THAT it is the Opinion of this Court, that the following Regulations may be beneficial to this Infirmary, which

was

was instituted for the Cure of the Sick and Lame, who are destitute of the means of support, and which derives its income from charitable contribution:

I.—THAT the 37th Rule, for the Government of this Infirmary, be thus amended, viz. That all persons admitted into the House, and in four months receiving no benefit, be discharged, unless, in the opinion of the attending Physician or Surgeon, they are then likely to receive a Cure or permanent Relief; in which case they may be permitted to remain as In-Patients, upon their Recommender, or some other responsible person, agreeing to pay to the Treasurer weekly the sum of three shillings towards their maintenance, so long as they continue in the Infirmary: but this payment, in particular cases, to be certified by the Physicians or Surgeons, may be dispensed with by the particular directions of the Weekly Board.

II.—THAT no Apprentice or domestic Servant, whose Master is able to pay for his Cure; no person who has been upon the Weekly List of Parish Paupers within three months preceding the illness, on account of which he has obtained the recommendation, or who is recommended in right of any Parish, Township, or Society-Subscription, shall be admitted as an In-Patient, unless the person recommending, or some other responsible person, shall engage to pay 2s. 6d. per week to the Treasurer, for such time as he shall continue an In-Patient.

III.—THAT no person recommending Patients by Proxy, shall have more than one In-Patient at a time, by virtue of any Proxy or Proxies given to him.

IV.—THAT

IV.—THAT such Subscribers, as give Proxies, be requested to point out in their Proxies the particular Parishes or Districts to which they may wish their Proxies to extend.

V.—THAT all future Benefactors of 20l. or more, given at one time, shall be Governors; but shall not be entitled to recommend more than one In-Patient and one Out-Patient in every year, for every 20l. by them given; and the In-Patients, recommended by any Benefactor, shall not exceed five in one year.

ORDERED,

THAT a Copy of these Proceedings, and of the Report of the Committee, be transmitted to the President, now attending his duties in Parliament; that he be requested to cause the above-proposed Regulations to be inserted in the Gloucester and Oxford Papers, and to call another General Court by public advertisement, when it may be convenient for him to attend, in order to determine upon the same.

G. TALBOT, CHAIRMAN.

GLOCESTER, OCT. 19, 1796.

IN Compliance with the above Request, I do hereby appoint a SPECIAL GENERAL COURT of the GOVERNORS of the GLOCESTER INFIRMARY, to be held at the Infirmary, on Tuesday the 22d day of November next ensuing, at twelve o'clock in the forenoon, in order to determine finally upon the Propriety of adopting the above Regulations, proposed by the last General Court.

R. GLOCESTER, PRESIDENT.

GLOCESTER INFIRMARY.

NOVEMBER 22, 1796.

AT a SPECIAL GENERAL COURT of the GOVERNORS of the Gloucester Infirmary held this day, for the purpose of determining upon the Propriety of adopting certain Regulations, proposed by the QUARTERLY GENERAL COURT held on the 6th day of October last;

RESOLVED,

I.—THAT no Person recommending Patients by Proxy, shall have more than one In-Patient at a time, by virtue of any Proxy or Proxies given to him;

II.—THAT such Subscribers as give Proxies, be requested to point out in their Proxies the particular Parishes or Districts to which they may wish their Proxies to extend;

III.—THAT all future Benefactors of 20l. or more, given at one time, shall be Governors, but shall not be intitled to recommend more than one In-Patient, and one Out-Patient, in every year for every 20l. by them given; and the In-Patients recommended by any Benefactor shall not exceed five in one year.

The two following Regulations being read, viz.

I.—THAT the 37th Rule, for the Government of this Infirmary, be thus amended, viz. That all Persons admitted into the House, and in four months receiving no benefit, be discharged, unless in the opinion of the attending Physician or Surgeon, they are then likely to receive
a cure

a cure or permanent relief; in which case they may be permitted to remain as In-Patients, upon their Recommender, or some other responsible person, agreeing to pay to the Treasurer weekly the sum of three shillings, towards their maintenance, so long as they continue in the Infirmary: but this payment, in particular cases to be certified by the Physicians or Surgeons, may be dispensed with by the particular directions of the Weekly Board;

II.—THAT no Apprentice or Domestic Servant, whose Master is able to pay for his cure; no person who has been on the Weekly List of Parish Paupers within three months preceding the illness, on account of which he has obtained the recommendation, or who is recommended in right of any Parish, Township, or Society Subscription, shall be admitted an In-Patient, unless the person recommending, or some other responsible person, shall engage to pay two shillings and sixpence per week to the Treasurer, for such time as he shall continue an In-Patient.

AGREED,

THAT the farther Consideration of these Regulations be postponed to a future day; and that Sir GEORGE PAUL be requested to communicate to the Public, in the mean time, the observations, which he has this day offered to the General Court, on the Propriety and Expediency of adopting the said Regulations.

R. GLOCESTER, CHAIRMAN.

OBSERVA-

OBSERVATIONS

ON THE STATE OF THE

GLOCESTER INFIRMARY, &c.

MY LORDS AND GENTLEMEN,

I Certainly should not have presumed, at so late a period of this Investigation, to offer opinions on the Principle of Regulations proposed by a Committee, and already sanctioned by a GENERAL COURT, had I not been encouraged so to do, by a most liberal and intelligent Member of the Committee, who has known the impracticability of my attending former deliberations, and who is acquainted with the tendency of those sentiments I am about to offer to this Court.

In further justification of myself, I must add, that by opening more general views of the State of the Infirmary, to the consideration of the Gentlemen present, I am acting in compliance with the wish of a Vice-President, whose opinion, with regard to every question concerning this Institution, will ever have great weight with me, as I doubt not it would have with every other Governor.

From the Report of the Committee, and the Resolutions of the last GENERAL COURT, now submitted to
your

your further consideration, it must be understood,—That the annual Subscriptions to this Infirmary, *together with* its ordinary and permanent Income,* are now, and usually have been, considerably less than the ordinary Expenditure;—that the Subscribers have depended on the extraordinary or incidental Income to make good the Deficiency;—and that, in any year or years, when this Income fails, that deficiency rests a charge on the funded Principal, and thereby further diminishes the ordinary and permanent Income. §

From the Result of the late accurate Investigation, there appears no cause to conclude there is any failure in the disposition of the Public to support this Charity, but, on the contrary, that the number of annual Subscribers has increased as the sufficiency of the Fund has diminished.

Proceeding

* By *ordinary* and *permanent* Income, is here meant Interest of funded Capital;—by *extraordinary* or *incidental*, is meant the annual produce of Legacies, Benefactions, poor's Boxes, and Collections, which, it will hereafter be shewn, has been depended upon, and applied to account current of the year.

§ There appears a difference betwixt the Report of the Committee, and the annual printed Report of 1795.—If the latter be correct, there is not only a charge on the funded property of 383l. 9s. but to the amount of ————— £415 17 8

Which sum, if added to the Cost of Building in the year ————— 420 4 7½

Makes an application of the Capital to the amount of 836 2 3½

See Appendix A. and B.

Proceeding to a following passage of the Report, we find this seeming paradox explained:—For it is nearly ascertained that the want of room, and the inefficiency of revenue, arise *conjointly* from the zeal of the Public operating upon an insecure foundation, and in an injudicious direction.

It is stated, that the whole number of Beds, provided for the reception of Patients, does not exceed 110; including those reserved, or which ought to be reserved for accidents, and for infectious or other peculiar cases;—that, *on an average*, there were 110 Persons lodged in these beds during the whole of the last year, and 116 during the former part of this year:†—These being average numbers, it is implied that, during one half of the time, the numbers, so lodged, were much greater; taking, however, a moderate calculation, it is clear, either that all the Beds were so occupied that none were vacant to receive accidents or peculiar cases, or that constantly 10 to 16, frequently 20 to 30, Beds were doubly occupied.‡

Do

† The printed Report of the year 1795, states the average number of In-Patients constantly on the books to be 149.—The Diet Lists of the House shew correctly that the average number fed and lodged was no more than 110. On enquiry, I find this great difference arises from a custom of sending Patients out of the House for air, or suffering them to return *convalescent* to their own homes, yet still remaining on the books as In-Patients. On comparing the two statements, it appears there were, on an average, 39 Patients in this situation.

‡ During ten weeks of the last year there were from 110 to 120,—during thirteen weeks, from 120 to 130 Patients, sleeping in these beds.

Do the Governors present *know*, or have they *considered*, that the utmost Breadth of these Beds, into which two diseased persons are thus placed *to sleep*, or rather *to inhale each other's diseases*, does not exceed 3 feet $4\frac{1}{2}$ inches?—Have they visited these Wards in a morning, or indeed in any other part of the day, when the poisoning prudence of Nurses has closed every inlet to air within their reach? If they have so done, even when there is no more than *one* patient in a bed, and no *extraordinary* number of beds in a ward, and, if they admit that a certain portion of renewed air is necessary to the purposes of animal existence; let them determine, whether it be charity to an Individual to send him into these Wards a Surcharge on the established numbers; or whether the person sent, and continuing months in such a situation, may not inhale the source of vital decay whilst expecting the cure of a muscular malady.

If the excess of “ numbers, beyond all former example, and beyond the provision of healthful accommodation,” be, as reported, and as I believe, the Point of Evil; I fear, that, by publishing an unqualified representation of a deficiency of means, you may invite additional Subscribers, with further recommendatory Rights, before you can extend “ the provision of healthful accommodation ;”—and you may thereby advance the evil 'till your Wards may become the Germ of general Contagion, instead of being, as designed, Sources of the public Health.

It appears that in the month of August last, when this investigation was first set on foot, there was a patient in the house who had been admitted in May 1794;—that there were 22 who had been admitted in the year 1795, and six others in January and February of the present year.

year. I do not apply this observation in proof of the injury sustained by the Funds of the Infirmary, although it is certain, as stated, that the Subscribers recommending paid only 55l. whilst their Patients cost 366l. It would be endless and useless, in such an investigation, to establish facts from *particular cases*, which will be lost in a *general result*; but I observe from it, that if persons recommended are liable to continue in the House during *six* months,—*eight* months,—a year,—or even *two* years,—and if they must so long breathe the air of the Wards, *that* air should be rendered fit for healthful respiration, either by enlarging the space, or diminishing (*by establishment*)* the number of those breathing within them.

If the Governors consider the real nature of this Institution, together with its actual State, they must perceive that when acting with a view to extend its beneficial Influence, they should not hastily and prematurely press for augmented numbers of Subscribers, who annually consume the amount of Benefactions,—which, under the circumstances stated by the Committee, ought rather to be employed in improving the accommodations, and in suiting the capacity of the House to the Wants and Disposition of the Times. The public feeling is our security that recommendatory rights will never be wanting sufficient to occupy the whole of such *healthful* accommodations as may thus be provided.

If to do good, by preserving Health as well as Life, be the end of our designs, of the two points urged in the report, the one as Cause, the other as Effect, I am inclined to consider the Effect, *existing in the Cause itself*, as of greater consequence than that pointed out as *flowing from it*.

* See Appendix K.

Agreeing, however, most perfectly with the COMMITTEE in OPINION,

“ That the Infirmary has been conducted with the
 “ strictest Economy in every article of Expence;
 “ and that the great Increase in the Expenditure is
 “ to be attributed to the extraordinary advance in
 “ the price of Drugs, and every article of House-
 “ keeping, rendered peculiarly burthenfome by an
 “ Increase in the number of In-Patients beyond all
 “ former example, and beyond the provision of
 “ healthful accommodation.”

If I durst *advance to you* such further Propositions as appear to me to be completely established by the result of this Enquiry, I should add,

That the Building and Accommodations are not proportioned to the increased and increasing numbers of recommending Subscribers.

That to admit such an Increase in the number of Patients, as to destroy healthful accommodation, is to subvert the very principle of the Institution.

That as the annual Subscribers do not, in any year, or on an average of years, pay the cost of Patients recommended by them, the power of the permanent Income to make good the deficiency must diminish, in proportion as recommending Subscribers increase.

That in Effect, during the last year, the amount of the whole annual Subscription has been so far insufficient to maintain the Patients recommended by Subscribers, that, together with the aid of the sum of 238l. 8s. 1d. applied from the permanent and extraordinary Income, it was still insufficient; so that, finally, it had been necessary

*sary to break in upon the Funds producing the permanent Income to the amount of 252l.**

And, That Patients afflicted with habitual ulcers, and other hopeless complaints, frequently pass many months in the Infirmary; uselessly consuming the vital principle of the common air, and endangering their own lives in the air so injured.

Such are the *Facts* arising to observation by means of the present Investigation. Should there exist amongst the friends of this Institution a difference of opinion as to the consequences, or the point of application of the Remedy; we owe to each other, and to the Charity, mutual communication, and united assistance.

The Regulations proposed, by way of obviating this derangement, are formed under Seven distinct Heads.

Of these, Two appear to have been made ORDERS, and therefore, in fact, no determination of this present Court can affect them. Regarding the other Five, "IT WAS DECLARED (generally) AS THE OPINION OF THE COURT,

"That they may be beneficial to this Infirmary, which
 "was instituted for the cure of the sick and lame,
 "who are destitute of the means of support; and
 "which derives its Income from charitable contributions;" but that "the further determination upon them should be referred to another GENERAL COURT;"—which COURT you are.

If, as I assume, the Report of the Committee justifies the general conclusion;—That the ACCOMMODATIONS

* See Appendix I.

OF THE HOUSE ARE INSUFFICIENT, and that the REVENUE IS INADEQUATE TO THE EXIGENCIES OF THE TIMES;—*then*, I fear, the Regulations proposed *taken together* do not constitute an *efficient* Total of remedy;*—they will *certainly* be troublesome and vexatious; I apprehend they will *not certainly* be productive.

If the present Dilemma be, in fact, no more than an accidental derangement of the balance of receipts and disbursements,—if the foundation be good,—the average of years will set the “odds all even” without *any* alteration of Rules, which will ever be taken as cause of offence by some amongst the many:—But, on the other hand, should it be found of such real importance as to threaten the existence of the Charity; be not timid in proposing the Remedy;—if inconvenient and disagreeable restraints must *necessarily* be imposed,—make them at once *decidedly* efficient, so that the End may justify the Means before the Public.

Proceeding from general to particular observation, I shall, with your permission, consider the ORDERS and REGULATIONS singly and separately, as they appear on the paper before us.

And,

* In comparing the proposed Regulations with their End, I have allowed myself to speak with that Freedom, which public considerations require;—as on such subjects it is my custom to *approve* without compliment, I hope I may have credit for *refusing my Assent* without the Spirit of Opposition.

To the Gentlemen of the Committee, who have reported on the State of this Hospital, we *all are*, and I myself *particularly am*, highly indebted for a complete Collection of Facts, from which alone it could be possible to reason to conclusion.

And, 1st, It was "ORDERED by the last GENERAL
 "COURT," without reserve to future deliberation,
 "That four Beds be always ready in separate rooms
 "for the reception of such Patients as the Physicians
 "may judge proper to be placed there; and
 "six at least, to receive persons brought in on sudden
 "accidents; that the remaining number be appropriated
 "to the use of the other Patients;—and,
 "that when more persons are recommended for
 "admission than this remaining number of beds
 "will contain, the Weekly Board be requested to
 "enforce the 30th and 31st Rules for the Government
 "of this Infirmary:"—that is to say, (by the
 "30th rule) "They shall inform the Recommender
 "by letter, that the Patient *cannot be received into
 "the House* for want of room, but is entered in the
 "Books as an *In-Patient*, and will be admitted as
 "soon as there is a vacancy, of which he (the Recommender)
 "will have notice;" and (by the 31st rule) an arrangement
 "of Cases is formed, to regulate the preferences on the
 "event of superfluous numbers. But these Rules, taken
 "together, produce in no degree a certainty, that the Patient
 "of a distant Recommender may not be *denied* Reception
 "into the House on his arrival, though a proper Case
 "for admission.

Although these REGULATIONS are already become
 ORDERS OF THE HOUSE, in part sanctioned by time,
 and not subject to our present determination; I cannot
 suppose them to contain any point so sacred as to be un-
 alterable at a future time; I shall therefore take this occa-
 sion of entering my objection to the spirit of them.

These,

These, and all similar Rules, which tend to uncertainty of Reception of Patients, however unobjectionable in regard to City Hospitals, where the sphere of recommendation is confined within a narrow circle, may be highly inconvenient if enforced in regard to *this* Infirmary. §

Whilst Rights to recommend are admitted *unconditionally*, I am of opinion that Patients sent to the Infirmary, under such Rights, (if recommended with due conformity to your Rules) should, *at all events*, be admitted,—otherwise, you establish an *intolerable* inequality of benefit, arising from relative situation:—Rules of this kind, under any practicable limitation, are fraught with hardship and disappointment, bearing *exclusively* on the distant Subscribers.

Persons so distantly situated as to have no daily, or weekly, or even monthly communication with the Hospital, once disappointed, can never afterwards recommend with confidence, and, it is natural to suppose, will frequently withdraw their Subscriptions; yet Subscribers living at such a distance as to avail themselves less frequently of opportunities to recommend Patients, are a support to the House, and assist in paying the expences caused by the more frequent recommendations of those who reside in the vicinity.

The superior advantages of an established Infirmary to the neighbourhood of its site, hardly need observation;—the reception of severe accidents, such as broken limbs, violent hemorrhages, &c. is, in fact, an
advantage

§ The Practice in this Infirmary seems to establish my objection; for we find these rejecting Rules neglected, altho' the alternative has been, the crowding Patients on each other in the manner reported.

advantage almost exclusive in favour of the few parishes surrounding the Infirmary;—critical and inflammatory cases, or such as are attended with a high degree of muscular or nervous irritation, in many instances, cannot be removed 20 or 30 miles, at least without very expensive modes of conveyance.

The Danger and Expence of conveying from such distances are circumstances of themselves abundantly discouraging when attended with a *certainty* of immediate relief; how much more so must they be, when aggravated by a consideration that at the end of the journey admission may be denied or suspended?

The first REGULATION proposed for your determination, is as follows:

- I. " THAT the 37th Rule, for the Government of this
" Infirmary, be thus amended, viz. That all persons
" admitted into the House, and in four months receiving no benefit, be discharged, unless, in the
" opinion of the attending Physician or Surgeon,
" they are then likely to receive a Cure or permanent Relief; in which case they may be permitted
" to remain as In-Patients, upon their Recommender, or some other responsible person, agreeing to pay to the Treasurer weekly the sum of
" three shillings, towards their maintenance, so long
" as they continue in the Infirmary: but this payment, in particular cases, to be certified by the
" Physicians or Surgeons, may be dispensed with by
" the particular directions of the Weekly Board."

The 37th Rule requires, " That all persons admitted
" into the House, and in two months receiving no
" benefit,

“benefit, be discharged, unless the Physicians or Surgeons certify to the Weekly Board, that there is a probability of their being cured, or receiving considerable relief.”

The REGULATION here proposed points to an Evil, which must have crept into the House either from neglect, or impracticability of the original Rule.

The difficulty of submitting this very proper design to definite Rule, seems to shew itself through every line of the proposed amendment;—and when you have read it, you will find, that (taken with its Dispensations) it is, as it must ever remain, no more than an Admonition to the medical Attendants.——It is surely a self-evident Proposition, “That persons, whom Physicians or Surgeons think they can neither cure or relieve,” should be sent away, to make room for those who may be cured or relieved.

If the Physicians and Surgeons *have* hitherto been invested with a similar power, and persons, without hope of cure or relief, have been permitted to remain in the House, the Faculty, in this instance, have not done justice to themselves or to the Institution.

If the present Rules do *not* sufficiently point to this power, in vindication of the common sense of the Governors, it should be amply given them; but, the Power once given, the Discretion of the Faculty can, in my opinion, have no other controul, than their own conviction of what is due to the Charity and to Themselves.

In short, the end proposed by this Regulation must (like all other the main ends of this Charity) depend on the DISCRETION of the medical Attendants, and on the

SPIRIT

SPIRIT and ENERGY with which they exert that Discretion:—We must rely on them, that *they* will give their PERSONAL EXERTIONS to those purposes, to which few of us contribute more than our MONEY. This duty performed is indeed inestimable service; its merit is doubtless noted by “the Recording Angel,” and its earthly reward is interior satisfaction, more grateful than human praise.

I shall endeavour to enforce my opinion on this point, by referring to the Counsel of a most respectable Author, who, experienced in the care of one of the most extensive medical Establishments in this kingdom, has written “A CODE of ETHICS and INSTITUTES, adapted “to the Professions of Physic and Surgery, and particularly regarding their Duties in Hospital Practice.”

Having proposed to the Faculty “the keeping Hospital Registers in such manner as to be useful to medical Science,† he says, “By the adoption of such a Register, “Physicians and Surgeons would obtain a clear insight “into the comparative success of their Hospital and Private practice; and would be incited to a diligent investigation of the causes of such difference. In particular diseases it will be found to subsist in a very “remarkable degree: And the discretionary power of the “Physician or Surgeon, in the admission of Patients, “could not be exerted with more justice or humanity, “than in refusing to consign to lingering suffering, and “almost certain death, a numerous class of Patients, inadvertently recommended as objects of these charitable “Institutions.

‘ In judging of diseases with regard to the propriety
‘ of

† See Dr. Percival's Medical Jurisprudence, p. 10.

‘ of their reception into Hospitals, the following general circumstances are to be considered :

‘ Whether they be capable of speedy relief ; because, as it is the intention of Charity to relieve as great a number as possible, a quick change of objects is to be wished ; and also because the inbred disease of Hospitals will almost inevitably creep, in some degree, upon one who continues a long time in them, but will rarely attack one whose stay is short.

‘ Whether they require in a particular manner the superintendence of skilful persons, either on account of their acute and dangerous nature, or any singularity or intricacy attending them, or erroneous opinions prevailing among the common people concerning their treatment.

‘ Whether they be contagious, or subject in a peculiar degree to taint the air, and generate pestilential diseases.

‘ Whether a fresh and pure air be peculiarly requisite for their cure, and they be remarkably injured by any violation of it.’ †

“ But no precautions relative to the reception of Patients, who labour under maladies incapable of relief, contagious in their nature, or liable to be aggravated by confinement in an impure atmosphere, can obviate the evils arising from *close wards*, and the false economy of crowding a number of persons into the least possible space. There are inbred diseases, which it is the duty of the Physician and Surgeon to prevent, as far as lies in their power, by a strict and persevering attention to the whole medical polity of the Hospital. This

“ compre-

† Quoted from Dr. Aikin's *Thoughts on Hospitals*, p. 21.

“comprehends the discrimination of cases admissible, air, diet, cleanliness, and drugs; each of which articles should be subjected to a rigid scrutiny, at stated periods of time.”

By the proposed amendment of the Rule, it is admitted, that in case the Faculty shall pronounce hope of a cure *after* four months, the Patient may still remain in the House, provided “the Recommender or other responsible person shall agree to pay to the Treasurer weekly the sum of three shillings.”—I admit the Design of this Regulation to be undeniably good; but the possibility of an *effectual* Execution of it does not so easily reconcile itself to my mind. Should the proposed engagement be entered into in favour of the Patient, it will be very troublesome to Recommenders at a distance; but I fear that more frequently the destitute Pauper will not find persons disposed to enter into such Engagements.

Let Gentlemen, who perform the duty of attending WEEKLY BOARDS, anticipate their situation, when, by this Rule, they are required to turn a deaf ear to Patients so unprotected, yet still suffering under the pain of a protracted disease, and soliciting permission to perfect a cure, hitherto suspended, but now admitted to be within prospect of attainment.

But it is said, “this payment in *particular Cases*, to be “certified by the Physician or Surgeon, may be dispensed “with by the directions of the WEEKLY BOARD:”—though the nature of the “*particular Cases*,” which may lead to Dispensation, is not explained, the expression must be understood as alluding solely to the *medical* case of the Patient;—however, where dispensing Power begins, Rule ends.

The

The dispensing Certificate of the Faculty, added to the dispensing Disposition of the Board, *may*, and probably soon *will*, be so confidently relied on by the lukewarm Patrons of an absent Patient, that no other protection will be thought of.

Second proposed REGULATION:—

II.—“ THAT no Apprentice or domestic Servant,
 “ whose Master is able to pay for his cure; no per-
 “ son who has been on the Weekly List of Parish
 “ Paupers within three months preceding the illness
 “ on account of which he has obtained the recom-
 “ mendation, or who is recommended in right of
 “ any Parish, Township, or Society Subscription,
 “ shall be admitted an In-Patient, unless the person
 “ recommending, or some other responsible person,
 “ shall engage to pay two shillings and sixpence per
 “ week to the Treasurer, for such time as he shall
 “ continue an In-Patient.”

That no Apprentice, or domestick Servant, whose Master is able to pay for his cure, nor, I will add, *any* person, who, from independency of circumstances, is able to pay for *his own* cure, should be admitted into an Hospital to rob the stores collected “ for the poor and needy, and “ him that hath no Helper,” must not only be cordially *admitted*, but *asserted* by every Governor of a charitable Institution. Nor does the injury and injustice stop at this first view of the case;—if Gentlemen of the Faculty gratuitously devote their time and services to the Institution, and submit to the *necessary* constraints of its Regulations, it is on the presumption, and with a consciousness, that they are fulfilling a charitable purpose;—they have a right
 either

either to the just Emoluments of their profession, or to the pleasing Reflections that they are administering to the wants of their *desitute* fellow-creatures.

After the excellent admonition which has been inserted in your annual Reports,† I should really imagine few instances of this sort would occur; but, if otherwise, I must suggest to you, before you confirm the Regulation, that by admitting the Principle of RECEPTION ON PAYMENT, you may countenance a practice of sending such persons into the House; and although they should pay even so much as to discharge their full expence, they would still occupy room set apart for charitable cases, and thus diminish your good work;—and further, it is admitting (what, I am sure, we all mean to deny) the exacting a thankless service from the Faculty.

Masters of menial Servants and Apprentices are, by Law and by Moral, bound to maintain them, in sickness and

† “Persons recommended according to the Rules of this Infirmary are received into it from any County or Nation; but it is earnestly requested, that every Subscriber would inform himself of the circumstances of the person he recommends, as several have been admitted into the Hospital of ability to have paid for their cure; whilst others have endeavoured to get admission, whose circumstances have been known to be good; and some have made pecuniary offers to the Faculty for their attendance and skill, provided they would not oppose their admission into the Hospital. The injury the Charity must sustain, if attempts of this sort are not speedily crushed, is too obvious to be insisted on; not to mention the injustice of breaking in upon the private practice and emoluments of many Gentlemen in the profession of physic and surgery in the country, as well as the Physicians and Surgeons of the Hospital, who gratuitously devote their time and services to the Charity.”

See Annual State of Gloucester Infirmary.

and in health; and if by subscribing a Guinea to such an Institution they can acquire a right to maintain and cure a sick servant for 2s. 6d. per week, the bargain is a good one *in point of æconomy*: I frankly own I wish to see every name erased from your list of Subscribers, which has been inserted from such considerations.

If any such abuse exists, as an object of real importance, some measure more *exclusive** should be adopted, with a *sole* exception of severe operations, where the advantages of hospital treatment may be of the utmost importance;—in such rare cases, on the principle of Humanity as distinct from that of Charity, receptions might be allowed, but, even then, not *with the consent* only, but at the *special instance* of the Faculty, and paying the *full* average cost not only of their Maintenance, but of the household Establishment. §

The case of Parish Paupers, included in this Regulation, does not come within the same chain of reasoning as the former description of persons. In regard to them, it is certain, on the one hand, that, as Trustees of a charitable Fund, we ought not to apply it in *aid*, or in *exoneration* of the Parish Rates, which would, in fact, be to relieve the opulent part of the community with the endowments of Benevolence; yet, on the other hand, we should be careful that, by our precautions, we do not exclude the most pitiable class of mankind from benefiting by the medical

* The existing Rule in this point appears to be more positive and exclusive than the one proposed:—"None shall be assisted with Advice or Medicines who are able to assist themselves and pay for their cure." See Rule xxvii.

§ See Appendix F.

medical advice and treatment to be obtained in this House, which they are otherwise wholly removed from *the possibility* of obtaining.

It is true, Rules, similar to that here proposed, have been adopted in other Hospitals,* which may justify a presumption

• LINCOLN.—That (for the Encouragement of remote Subscribers as well as for the greater Benefit of the Poor) the Governors will allow to all Out-Patients, who shall come from the distance of 7 miles or upwards, and have not been discharged for misbehaviour, One Shilling per Week towards defraying their Expences while at Lincoln, (where no Out-Patient can probably be lodged, washed, and dieted, under Three Shillings or Three Shillings and Sixpence per Week) provided the Officer of their respective parishes shall allow them Two Shillings and Sixpence per Week, or such further sum as shall be found necessary for the Patient's support during the time of their abode at Lincoln as Out-Patients.

OXFORD.—It is requested that no Subscriber will recommend any Patient from a Parish Workhouse; as no person under that description will be admitted, lest they should bring some infectious disorder into the Infirmary.

Soldiers, and persons relieved by any parish, as well as those who are Members of Societies intitled to weekly pay from the Club-box, shall hereafter pay 4d. a Day to the Infirmary so long as they remain.

HEREFORD.—That no Apprentice or Domestic Servant, whose Master is able to pay for his cure; no Person who has received Parish relief within three months preceding, or is recommended in Right of any Parish or Township Subscription, shall be admitted as an In-Patient, unless the person recommending shall undertake to pay 2s. 6d. a Week to the Treasurer for such time as he shall continue an In-Patient.

MANCHESTER.—That no persons shall be admitted In-Patients, who have received any pay, within three months, from the township

sumption of its practicability and utility; approving of the principle of charging the Parish Rates with the cost of relieving their sick Poor as well *in* the Hospital as *out* of it;—yet, adhering to an opinion that the proposed mode of drawing an equitable payment from a Parish cannot be enforced without producing a total exclusion of the Objects, (except in Cities and small Districts where cases may be easily ascertained by the Governors)—I do not oppose an experiment of this Regulation, which, if *universally* practicable, may be beneficial. Considering the distance and disposition of Persons concerned, I only desire to be understood as doubting the possibility of bringing it into *universal* practice;—and if it be not universal, it will be unjust.

A Parish Officer pays a Subscription to the Infirmary without a shadow of legal authority; amongst the variety of parishioners, some would naturally be found to oppose and prevent his so doing, were it not palpably a good bargain for the Parish;—but without the aid of some *collateral* interference of a Magistrate, (for of *direct* authority he possesses none applicable to this case) it is probable the Officer will avail himself of his plea of illegality, when required to make the payment proposed.

Regarding the 3d and 4th proposed REGULATIONS;

It may be presumed that they are a necessary result of Facts, which have appeared to the Committee in the course of their Enquiry.

As

ship or place to which they belong, unless such township or place has, by its proper Officer, subscribed at least Two Guineas annually; or unless such Officer will pay 3s. 6d. per Week for their subsistence severally, during their continuance in the house.

As no objection to them suggests itself to me, they claim my assent, and require no further observation.

Fifth proposed Regulation.

V.—“ THAT all future Benefactors of 20l. or more,
 “ given at one time, shall be Governors; but shall
 “ not be entitled to recommend more than one In-
 “ Patient and one Out-Patient in every year, for
 “ every 20l. by them given; and the In-Patients,
 “ recommended by any Benefactor, shall not exceed
 “ five in one year.”

With regard to this Regulation, if adopted, it will be a perpetually growing benefit to the Institution, and may, in time, perhaps, save it from the effects of other miscalculations.

The Contributor of a principal sum has been *emphatically* termed a Benefactor, as *purporting* to be in a greater degree useful to the Charity than an annual Subscriber; let him be *really* so, or it is a distinction without a difference, and becomes invidious. The existing Rule, which allows Rights of Recommendation, as ten per Cent. for life on a small Benefaction, with regard to many persons in the early or middle stations of life, offers a good Bargain to a Purchaser who is desirous to acquire such rights; and it is natural to suppose the measure is frequently adopted with this view.

By the proposed Regulation, a line is drawn which, in fixing the Distinction, marks a *real* difference;—to *no one* can it be *unjust*, for it regards not any *past* transaction;—and, as to the *future*, Persons desirous of contributing merely on the scale of annual Subscribers, have still the

one plain and simple mode open to them; and it seems to me totally unnecessary to offer two modes on the same scale, for the mere purpose of encouraging a speculation against the Charity.

But, finally, should even *reasonable* objections be made to this Regulation,—I answer, We are met to correct an unfavourable balance of account between the number of Rights to recommend Patients, and the Revenue applicable to maintain them :—It is probable this cannot be done by *any* Plan wholly void of objectionable circumstances, and the question on the one here proposed is merely, Whether it be more or less objectionable than another?

I cannot conclude this comment on the consequences of the proposed Regulations, without pointing your attention to the increase of difficult Duties imposed, by them, on the WEEKLY BOARD.

Although there are 447 Subscribers of *money* to this Charity, there are not more than a dozen Contributors of their time and personal attention.—It is by no means unusual for a *single* Governor to form the WEEKLY BOARD for admitting and discharging Patients, and for executing the other business of the day; I believe our honoured and respected President, in that punctual performance of his share of this Duty, which he enjoins himself during his residence in his Diocese, has sometimes found himself wholly unattended in this room of business.

When this BOARD, in addition to its present Duties, will have to scrutinize into recommendations,—to discover the *real* situation of the proposed Patients, whether poor or affluent,—whether “servant, apprentice, or on the weekly
list

list of parochial paupers," and, the situation discovered, to act in consequence, and to demand payment, or security for payment, of the weekly charges;—it will, indeed, be an arduous Duty, much too great to be *required* of any portion of the Governors; though, if practicable, I am confident not too great for accomplishment by the zeal and application of those Gentlemen who have proposed the Rules.

HAVING thus submitted to the Court such *specific* Reflections on the proposed Regulations as have occurred to me, with a freedom, which nothing less than the nature of the subject could excuse; under the like sanction I shall further trespass on your patience, whilst I add a few words of *general* observation on the state of the Institution.

At the last GENERAL COURT, after the questions resulting from the Report of the Committee were disposed of, and many of the Governors had retired, I ventured to express some opinions on the general State of the Establishment, which the remaining Governors were desirous "should be arranged into the form of Propositions to be laid before this COURT, with previous public notice of such an intention."

Reflecting on this proposal, I declined to attach such importance to individual opinion; but, as a more general insight into the state of the Institution may assist the Governors in forming a correct judgment of the efficacy of the proposed Regulations,—I shall submit my sentiments to the Court without further apology, but, certainly, without presuming to originate any new Propositions. My

opinions will probably appear too decided, and my counsel too bold to be acted upon, until the public mind shall be prepared by disasters greater than those which as yet appear to affect this Charity.

I am not sufficiently acquainted with the annals of this Establishment to reason correctly on its origin and progress; but we may give its Founders credit for so much common sense, as that, in fixing the value of the Right of recommending, *some* regard was had to the cost of a patient to the Institution.

Let us suppose, that when the Infirmary was first instituted for the cure of poor sick persons, it might be necessary to open it for their reception without *any* Endowment, or (which was probably the case) with *no greater* than would pay the cost of accidental Patients;—it is evident that the first price of a Right of Recommendation, though not *individually* adequate to the cost of a Patient to the House, must have been so much as that the *whole* of the annual Subscription should defray the aggregate expence of the board and maintenance of Subscribers' Patients.

If it was necessary at first to observe this proportion, the same reasoning will operate at all future times,† until the permanent Income shall become so great as to provide for all deficiencies;—otherwise, if the expence of maintenance

† It may be argued, that this Institution is founded on general Principles similar to those of other Hospitals. This may be *true*, and yet my general argument may not be *false*. And as a reason for not giving up my Theory in submission to the universal Practice, I shall refer to the late Reports of all other Hospitals founded on the same Ratio of Payments. It will be *found that they are all labouring under the like symptoms of decline as our own*.

tenance should increase, (the right of recommendation continuing the same) the recommending Subscriber must accept of assistance from extraordinary and incidental means. It has hitherto so happened in this Infirmary;— Benefactions to the fund have so constantly and equally supplied the deficiency between the amount of Subscriptions, and the cost of the Subscriber's Patients, that they have been relied on, and calculated as an ordinary Revenue.*

On the last declining appearance of the Funds of this Charity in the year 1784, the liberality of the Public was invoked by an advertisement, setting forth their state; and the Public so well answered the call, that 2603l. has been added to the Capital since that time, over and above what has been consumed in annual disbursements;† but, unfortunately, the same unqualified hint produced an increased number of Rights of recommending, not only accruing from small Benefactions, but from annual Subscriptions.

So

* See Appendix C.

† At the commencement of the year 1784, it was found necessary to sell out 1000l. 3 per Cent. Stock, when the Price was so low that the produce was no more than 563l. But, the Situation of the House being made known, the Finances began to improve from that moment; for, it appears, that before the End of the *same* year, 500l. Stock in the 3 per Cents. was repurchased at the cost of £272 10 0

In 1787, £500 Stock	} was purchased for the sum of	360 17 6
In 1788, 200 ditto		149 5 0
In 1789, 200 ditto		157 5 0
In 1790, 600 ditto		445 5 0
In 1791, 300 ditto		264 7 6
In 1792, 500 ditto		453 15 0
In 1793, 500 vested in County Gaol Bonds - - -		500 0 0

£2603 5 0

So great indeed is now the disparity between the sum paid for such Right, and the actual average cost of each Patient, that, should we again solicit Subscription on the same terms, the kind intention of the Public may ruin our Funds, and smother our Patients.

It is to the last degree irksome to point out circumstances which tend to check the kind emotions of the heart, or to limit the pleasing power of being serviceable to a fellow-creature; but the consequences (as explained by the Committee) which must follow an overflowing House, and an inadequate Revenue, make me bold to direct your eye to the real evil, and your hand to the true remedy.

When this Institution was founded, a Right to recommend a patient cost One Guinea; meat was then $2\frac{1}{4}$ d. per lb. malt 3s. $3\frac{1}{2}$ d. per bushel, and other articles in proportion.*—Meat is now $4\frac{1}{2}$ d. per lb. malt 6s. $7\frac{1}{2}$ d. per bushel, and other articles in proportion; yet we still retain a Right of Recommendation for *One Guinea!*

Every In-Patient sent into this House, during the last year, cost on the average 65s. $5\frac{1}{2}$ d.* For the power to charge

* Infirmary Report of the Prices paid for Articles of Household Consumption, averaged through the years 1755 and 1762.

	s.	d.	s.	d.
Meat per lb. - - - - -	0	$2\frac{1}{2}$	0	$3\frac{1}{2}$
Malt per Bushel - - - - -	3	$3\frac{1}{2}$	3	$0\frac{1}{2}$
Hops per lb. - - - - -	0	8	0	10
Candles per lb. - - - - -	0	$5\frac{1}{2}$	0	$5\frac{1}{2}$
Soap per lb. - - - - -	0	$5\frac{1}{2}$	0	5
Cheese per lb. - - - - -	0	$2\frac{1}{2}$	0	$2\frac{1}{2}$
Butter per lb. - - - - -	0	$6\frac{1}{2}$		
Coals per Ton (Halling included) - -			9	$9\frac{1}{2}$

* See Appendix F. and H.

charge the Establishment with this expence the recommender paid 21s.

From what resource was this immense Bonus to the recommending Subscriber supplied?

1st, He was supplied by the Subscribers who did not recommend, to the amount of 22s. 1 $\frac{3}{4}$ d.

2d, He received from the Interest of the Benefactors' Capital 10s. 5 $\frac{1}{4}$ d.

3d, He consumed of that Capital 11s. 0 $\frac{1}{4}$ d.†

This benefit is *exclusive* of the cost of Out-Patients.

It has been the custom to place Legacies and Benefactions to account current; and the deficiency of the year being first paid from them, the remainder has been applied to increase the Capital Fund;—upon an average the current account has been supplied with 400l. per annum by these means;‡ and in the last year, when this Resource failed, the Capital was diminished to that amount|| for the ordinary Expenditure.

In considering Subscribers as I have done, for the purpose of elucidation, I must lay my claim to be understood in the strict sense of my expression; and when proving that Subscribers of one or of two Guineas *are*, and that those of five Guineas *may be* dependant on the Benefactors, I am not to be considered as intending to depreciate either their *motive* or their *act* of beneficence towards the pitiable Poor; for, on the contrary, I consider the Subscriber, who recommends with caution in the selection of his objects, to be an useful and a necessary instrument in applying the money

† See Appendix I. ‡ See Appendix G.

|| See Appendix A. and B.

money of inactive contributors;—even the parish Officer, in the practice of his cunning to save his parish Rate, effects a beneficent act; and, if the healthful accommodation could be increased as objects were presented, I should rather regulate than repress the ardour of his endeavours.*

We are united in the purpose of doing all the Good we can, and I acknowledge myself one of those who think it should be done in our own Generation; that Charity should not be deferred, or its talent hid in a napkin: But in this case, unfortunately, the ultimate *practicable* good is fixed; it is determined by the dimensions of our house, and the convenient number of our beds; § we must act relatively to circumstances, and, not being able to extend the quantum of Good, we have only to see that it be duly dispensed, and equitably apportioned,—that the destitute, and not the affluent, be benefited by charitable donations. The

* On the ground of pressure on the Finances of the House, if the Faculty would rigidly execute their powers of investigating and banishing such cases as are factitious or hopeless, I should *at present* be disposed to provide for all others who were offered. When the times bear hard on the impoverished class, then should the energies of such Institutions be *peculiarly* strained, perhaps even to a risk of a temporary diminution of the Capital.

§ If it be true, as contended, that no more than a certain quantity of the medical Good can be done, with a given Accommodation, and within a given Space;—if the *whole* of possible Good be circumscribed, so also must be *the parts*;—if to receive Five Hundred Patients be to cure, and to receive a Thousand be to destroy, the total amount of Good performed is greater in receiving the Five Hundred than in receiving the Thousand; and the Subscriber who sends one of Five Hundred is more beneficent than he who sends two of a Thousand.

See also Appendix K.

The increase in number of patients, and the consequent augmented burthen on the Fund, has been considered as a progressive consequence of the pressure of the times.— It has been supposed that the scarcity, or inferior quality of Food may have impaired the Health of the labouring Poor; and that persons thus indisposed, being less able to support themselves, would naturally have recourse to parishes, and their parishes to the Hospital.

My idea of the cause of the increase of Patients and Subscribers, though neither contradictory nor exclusive, is yet something different; I conclude from these effects on our Infirmary, (what I am otherwise ready to admit) that there is an increased population within the sphere of its operation; and that the experience of benefits received in it has overcome the former prejudices of the people; I therefore infer that greater extent is become requisite for providing for the sick poor, who are desirous to *accept* the benefit, and greater latitude for the bounty of the affluent who are inclined to *grant* it. If such be *really* the state of the case, should we not act in conformity to it? We are now proceeding on a system diametrically opposite to such a purpose; for the produce of Benefactions, which can alone enable us to extend the space, and increase the accommodation, is called for and consumed in the year, to make good the deficiency in the ratio of Subscription; and it will follow, as a natural consequence, that as the Bonus on Subscription increases, additional Subscribers will present themselves, and multiply demands for admission, whilst the cost of such increased admission will further absorb the means of extension:—Whereas, were we determined to act as in pursuit of the remedy, it would be necessary, as it is reasonable, that the Body of Subscribers

scribers should maintain their own Patients, whilst the produce of Legacies and Benefactions should accumulate and be applied to increase the accommodations.

The necessity of some augmentation of payment on account of Patients sent to the Infirmary by Subscribers' recommendations, seems, however, generally admitted; and the mode in which such augmented payments should be made, appears the sole point of difference of opinion amongst the friends of the Institution.

Speaking decidedly for *myself only*, on this question, I say, I had rather pay *more* for a Right which allows my Patient to remain in the House *at all events* till he can receive a cure, (supposing his case to be proper) than with the *lesser* payment to have such Patient subject to dismissal, or myself or parish liable to be called upon for weekly payments. Referring to a former observation, I repeat that the Recommender who really seeks fit objects, is a very useful Member of our Body of Charity; and I would, therefore, rather support a Proposition, that the requisite addition should be levied on the *whole number* of Subscribers by *previous* subscription, than that Recommenders should be liable to be called on for *subsequent* payment.*

As to the guard intended to be provided against the designs of Parish Officers, who are devouring our resources in relief of the burthen of their respective poor-houses, I own I see the evil more clearly than the remedy; they are a class of men much too wise in their generation to be really circumvented by the possible penetration of a

WEEKLY

* See Appendix K.

WEEKLY BOARD sitting at a distance from proof. One fact we know; if Subscription, so far as a right to recommend two Patients for two Guineas, were not a beneficial contract, we should not see the names of 54 parishes on the books, some of which are situated beyond the limits of the County, and some at 20 or 30 miles distance from the Hospital; and as it is a calculation of profit and loss which can alone *induce*, or, indeed, which can *excuse* such Subscribers, it must be concluded, that if you required of them, as Subscription, the fair amount of the average cost of a patient,† the name of every parish would soon disappear from the books without recurring to a more complicated measure.

With regard to the few individuals who may be presumed to subscribe on a calculation of self-advantage, and who exercise their Right by recommending servants and others able to pay for themselves, I conceive it would be difficult to contrive an effectual controul over such persons by any *positive* Regulation that would not be irksome to the Body of Subscribers; the Rule standing in your present code seems more decisive than that proposed; and if *that* on experience has become a dead-letter Law, what reason have we to expect that a new one will have a better chance to be enforced?

I really should hope that the observations which have been made on such motives for Subscription, would lead to self-conviction, and self-conviction to self-correction; but, if not, let it be observed, that by admitting the principle

† At Manchester the Parish Officers have the alternative of paying Two Guineas annual Subscription, or 3s. 6d. per Week, for a Patient. *Vide Rule, Manchester, quoted in a former Note.*

ciple of WEEKLY PAYMENTS, you make a Boarding-house of your Infirmary.

On one other point only it remains for me to remark; and, if I am not mistaken in my enquiry, it is of considerable importance to the account.

In the Report of the Committee, I observed, that the excess of expenditure is, in a degree, attributed to the extraordinary advance in the price of Drugs;—looking to the particulars of the annual account, I observe an expenditure of 315l. 4s. for medicines and articles used in the Apothecary's shop: this being a sum equal to a sixth of the whole ordinary expenditure of the House, and more than 6s. 6d. on each Guinea subscribed, I was led to a further investigation;—I observed that the Out-Patients were supplied from this shop, and, reckoning them as taking (*or wasting*) no more medicine than the In-Patients, the sum of 163l. 14s. must be placed to that account;§ and whatever be the average cost of an Out-Patient relieved, is the amount of an advantage, which the Subscriber, who lives within reach of benefiting by this power of recommending, enjoys over and above the Subscriber living beyond those limits.

I shall presume it may be taken generally, that no person residing more than seven miles from the Infirmary, can be benefited by an Out-Patient's recommendation; a person *at that distance* will rarely attend at the Infirmary; if he does not attend *in person*, and *be seen by his Physician*, he ought *on no account or plea* to have medicines;—if he does attend, the trouble and the expence,

or

§ See Appendix E.

or the fatigue of coming and going, are not recompensed by the benefit.

Within the distance of seven miles, there appear to be about 107 persons who subscribe 204 Guineas, out of 447 persons subscribing 955 Guineas; that is to say, one-fourth are benefited by this privilege at the cost of the other three-fourths who cannot be benefited.

But further, presuming I may reason from the printed annual report, I conceive there must be excessive abuses committed by persons receiving medicines as Out-Patients;—abuses, destroying the purpose of the Institution, and to which all charities of this kind are exposed, if not controuled by a vigilant inspection. Although we presume that there are few more than 100 Subscribers who are so situated as to use this privilege, there were on an average, through the last year, 161 Out-Patients on the Books.

I have long assisted in conducting a dispensary Charity, whereby 500 persons are annually relieved; and, in the most extravagant seasons of ague, the average cost per head (including from 30 to 35*l.* per annum paid to the Apothecary for dispensing the medicines) has not exceeded 3*s.* 8*d.* per head.*

If I am not egregiously misled by the account from which I have calculated the cost of Out-Patients, discharged in the last year from this Infirmary, it amounts, at least, to eleven shillings per head.†

* In the last year 548 Persons were relieved at the Expence of of 99*l.* or 3*s.* 7*d.* $\frac{1}{2}$ per head; and for this year, each Subscriber is allowed Seven Tickets for a Guinea.

See Report, Gloucester Journal, Jan. 30, 1797.

† *See Appendix H. and E.*

POSTSCRIPT.

*To the PRESIDENT and GOVERNORS of the GLO-
CESTER INFIRMARY, present at the GENERAL
COURT, held on the 22d day of Nov. 1796.*

MY LORDS AND GENTLEMEN,

AS I have committed the above pages to the press in compliance with a Request contained in the public advertisement of your Proceedings, I must make no apology for troubling the Public with my thoughts on that useful Institution, which is the subject of them. But, when I reflect that, by offering my individual opinions to the minute and critical investigation of a Reader, I may be considered as innovating on a system of beneficence familiarized to the Public by long-established habits and experience, I cannot but entertain apprehensions, that the publication may not be received *universally* with that candour and partiality, with which you honoured the recital at your Meeting.

I am, your most faithful
and obedient Servant,

G. O. PAUL.

BATH,
JANUARY 31ST, 1797.

APPENDIX.

A.

Abstract of the ACCOUNT of the RECEIPTS for the
year ending December 31st, 1795.

	£.	s.	d.
INTEREST on 11,800l. 3 per cents	354	0	0
Ditto on 3000l. on Land Security	150	0	0
Ditto on 500l. on Bond	—	25	0
Ditto on 500l. Gaol Security	22	10	0
Rent Charge	—	13	10
	565	0	0
Deduct a Life Rent paid	—	16	18
Ordinary and Permanent Income	£548 2 0		

			£.	s.	d.
		Brought over	548	2	0
		£.	s.	d.	
Benefactions	—	41	1	0	
Legacies	—	25	5	0	
Collection at the Cathedral		17	13	9	
Ditto from the Poor's Boxes		5	5	3½	
Extraordinary and Fluctuating Income			90	16	6½
Received for the use of the Baths		1	11	6	
Received by Annual Subscriptions					
for the current year	—	963	7	6	
Ditto by Arrears	—	54	1	6	
Subscribers Payments			1017	9	0
Total Annual Revenue	—		1656	7	6½
Incidental Receipt for the Board of Soldiers admitted as In-Patients	—		19	7	4
Expended, the Balance in the Treasurer's hands at the commencement of the year	—	413	5	2½	
Balance now due to the Treasurer		352	16	8	
Diminished in Stock since last year's account	—	70	0	4½	
Spent of Principal in the year			836	2	3½
			£2511	17	2

B.

Abstract of the ACCOUNT of EXPENDITURE for the
year ending December 31st, 1795.

	£.	s.	d.
Paid for Bread, Meat, Malt, Coals, and all other Articles of House- keeping — — —	1238	4	3
Lodging and Nurfing Patients	5	15	0
	1243	19	3
Deduct for Grains sold —	8	1	6
Total Expence of Housekeeping	1235	17	9
Deduct Board of Servants	351	0	0
Board of Patients —	884	17	9
Add Medicine for In-Patients	151	10	0
Medicine and Board for In-Patients	£1036	7	9
Salaries, Rent, Taxes, Water, and Insurance —	310	17	2
Board of Servants —	351	0	0
Household Establishment — —	661	17	2
	£1698	4	11

		£.	s.	d.
	Brought over	1998	4	11
Printing and Stationary	—	30	18	1
Repairs of House and Furniture	—	93	0	2
Additional Furniture	—	105	15	5
Medicines for Out-Patients	—	163	14	0
Ordinary Expenditure		2091	12	7
*Cost of building additional Offices, &c.		420	4	7
		£2511	17	2

C.

A STATEMENT,

SHEWING that on the average of ten years, ending December 1795, the Ordinary and Extraordinary Income was greater than in the single year 1795.

	£.	s.	d.
Interest of Money in 1788	575	0	0
Ditto in 1793	509	0	0
Ditto in 1795	551	0	0

* Though so large a sum need not be placed to account as an annual expence to the establishment; yet the item of "Building" must not be intirely omitted on an average of years.

APPENDIX.

53

£. s. d.

Interest of Principal Money on the average
of 3 years — —

511 5 0

Rent Charge of 13l. 10s. half the ten years

6 15 0

518 0 0

Life Rent deducted —

16 18 0

501 2 0

Permanent Income —

Legacies — — 259 6 10

Benefactions — — 113 19 7

Boxes and Church Collection — — 37 3 3

Baths and Garden — — 17 0 0

Fluctuating and Extraordinary Income

427 9 8

Total Income on the average of 10 years

928 11 8

Total Income in the year 1795 —

638 18 7

Greater on the average of 10 years —

£289 13 1

D.

WHEN addressing the General Court, I considered the average time of continuance of each Patient in the House as eight weeks and five days, and calculated the average cost accordingly; having then taken the whole number of In-Patients admitted and discharged as 701, and the average numbers on the Diet List as 110.

On reconsidering this ground of calculation I find it erroneous; by reference to the printed STATE OF THE INFIRMARY for the year 1795,* it will be seen, that in the number 701, therein stated as total admissions, the number of Patients in the House at the commencement of the year, and those remaining at the end of it, are *both* included;—whereas the mean proportion only of the two numbers can be considered in regard of the *whole time* passed in the Infirmary.

For the sake of greater perspicuity, I have taken the exact number admitted in the year as having passed the *whole* time in the House; stating, then, the numbers admitted and discharged in the year as 589, and 110 as the average of numbers in the House, it will be found that the average time of each Patient was nine weeks and five days.

* I must premise, that being so situated whilst correcting these Observations for the press as to have access to no other authority, I have depended on the correctness of the annual Report of the STATE OF THE GLOUCESTER INFIRMARY."

E.

I HAVE also to acknowledge an original error in my data relative to Out-Patients, as reasoned upon before the GENERAL COURT.

Referring to the printed Report for 1795, it will be seen, that it is by no means fair to state, as I then did, the comparative expenditure in Medicines per head on the entire numbers of Patients *admitted* in the year, or to say, as 443 Out-Patients are to 701 In-Patients. This estimate should be formed on the comparative numbers *constantly on the Books* under each head. The number of Out-Patients averaged on the two terms given as remaining on their Books is about 161; whilst that of the In-Patients is stated in the same Report as 149; therefore the greater portion of medicine should be placed to account of Out-Patients, or as 16*l.* 14*s.* to 15*l.* 10*s.*

If there were on an average 161 Out-Patients constantly on the Books, and the total admitted within the year was no more than 285, the average continuance of each Patient on the Books must be the extraordinary term of 29 weeks and three days.

If the average time each Out-Patient continued on the Books be 29 weeks and three days, whilst that of the In-Patients is no more than nine weeks and five days,—the expence arising for medicines for Out-Patients is as 7*d.* per head on the weekly cost of In-Patients, whilst the cost of the supply of medicines for the In-Patients themselves is no more than 6½*d.* per head.

F.

A TABLE,
 SHEWING the Annual and Weekly Charge on each In-
 Patient, in regard to the different heads and to the total of
 expenditure; calculated on 110 Persons, being the ave-
 rage of numbers on the Diet List for the year 1795.

Heads of Expenditure.	Annual Cost of 110 Persons.	Annual Cost of One Person.	Weekly Cost of One Person.
	l. s. d.	l. s. d.	l. s. d.
In-Patients Board - - -	884 17 9	8 0 10½	0 3 1½
In-Patients Medicine - -	151 10 0	1 7 6½	0 0 6½
Out-Patients Medicine	163 14 0	1 9 9½	0 0 7
Total Board and Medicine	1200 1 9	10 18 2½	0 4 2½
Household Establishment, } with taxes, repairs, &c. }	891 10 10½	8 2 2	0 3 1½
TOTAL EXPENDITURE	2091 12 7½	19 0 4½	0 7 3½

G.

A STATEMENT,

Shewing that the Income, ordinary and extraordinary, does not defray the cost of the *whole* of the Household Establishment, together with the Board and Medicines of the Patients charged on the Establishment, and the cost of Medicines for Out-Patients. That there is a deficiency of 617l. os. 6d. which, if not made good by the Subscribers, must be taken from the capital Fund:—The Body of recommending Subscribers pay 201l. 6s. 4d. more than the cost of the Board and Medicines of their own Patients, and towards their share of cost of the Household Establishment:—But, the Subscribers' payments are inadequate to the total deficiency by the sum of 415l. 14s. or 8s. 10½d. in each Guinea; or (exclusive of the expence of Out-Patients) by the sum of 252l. os. 2d. or 5s. 4½d. in each Guinea.

Cost of the whole Household	£.	s.	d.
Establishment	—	891	10 10
21 Benefactors' Patients, Board and			
Medicine for 9 weeks and 5 days			
at 3s. 7½d. per week, or each			
patient 35s. 2¼d.	—	36	18 9
101 Accidents at the same sum per head	177	13	6
10 Physicians' and Surgeons' Pati-			
ents at ditto	—	17	12 0
		£1123	15 1

But there are fix subscriptions above	£.	s.	d.	£.	s.	d.
5 guineas which give no rights						
to recommend, and which may						
be applied in aid of this charge	31	10	0			

Whole cost of the establishment with the Pati-						
ents charged upon it, by the Institution	1092	5	1			
Expende of Out-Patients.	—	—	—	163	14	0

Total, Out-Patients included	—	1255	19	1
Income Ordinary and Extraordinary		638	18	7

Deficiency	—	617	0	6
Board and Medicines for 457 Sub-				
scribers' Patients at 35s. 2½d. each	804	0	0	
Deduct Soldiers' subsistence paid	19	7	4	
		784	12	8

To be paid by Subscribers, or the capital fund	1401	13	2
The body of recommending Subscribers have			
paid in 1795	—	985	19

Deficiency of Subscription at 8s. 10½d. on each			
of the 939 guineas paid, is	—	415	14
But the Cost of Out-Patients at 3s. 5½d. on			
each guinea being discharged	—	163	14

To secure the fund, and make good the defi-			
ciency, an addition of 5s. 4½d. on each guinea			
would be sufficient	—	—	£252 0 2

H.

By reference to the foregoing Table (F) it will be seen that, although each subscriber should pay 5s. or even 10s. advance for his right to recommend, he will, by subscribing, still be admitted to a means of applying his charity money to a very considerable advantage.

The average continuance of a Patient in the house being taken at 9 weeks and 5 days, and the weekly cost of each Patient at 6s. 8 $\frac{1}{4}$ d. the total cost of each In-Patient is	£. s. d.
—	3 5 5 $\frac{1}{4}$

The average continuance of each Out-Patient on the books, being taken at 29 weeks and 5 days, and the weekly cost of each Patient at 4 $\frac{3}{4}$ d. if a Subscriber makes use of his privilege of sending an Out-Patient, he has an additional benefit of	—	0 11 5 $\frac{1}{4}$
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Total value of each right	£3 16 11 $\frac{1}{4}$
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I.

A STATEMENT,

SHEWING that the Annual Income, even at this low ebb, has not only paid the *whole cost* of Patients recommended by Benefactors, and by the Faculty, or brought in consequence of Accidents, but has given a surplus to the Subscribers benefit.—It proves, therefore, that the Establishment is in itself secure, and that neither Patients by accidents, or by recommendation of Benefactors or the Faculty, are a burthen on the Subscribers.

	£.	s.	d.	£.	s.	d.
Income Ordinary and Extraordinary	—	—	—	638	18	7
21 Benefactors Patients for 9 weeks and 5 days, at 6s. 8½d. per week, or each Patient 65s. 5½d.	68	14	7½			
101 Accidents each at the same	330	11	3½			
10 Physicians' and Surgeons' Patients at ditto	—	—	—	32	14	7
	432	0	6			
Subscriptions received above 5 guineas (not recommending) in aid of the establishment	—	—	—	31	10	0
				400	10	6
Surplus to Subscribers' benefit				£238	8	1

457 Patients recommended in the year £. s. d.
 by subscribers at 65s. 5½d. each 1495 14 6
 Deduct Soldiers' subsistence as 10½d.
 on each Patient — 19 7 4

Total cost of Subscribers' Patients 1476 7 2

The Subscribers recommending
 these Patients paid each 21s. or
 total — 479 17 0

Bonus to the recommending Sub-
 scribers, 43s. 7½d. on each
 recommendation — 996 10 2

This Bonus was paid,
 1st. By 482 Subscri-
 bers *not* using their
 rights of recommenda-
 tion, at 22s. 1½d. £506 2 0

2dly. By interest of the
 funds of the Charity
 at 10s. 5½d. 238 8 1

3dly. Confumed of the
 Principal of the same
 funds at 11s. 0½d. 252 0 1

996 10 2

	£.	s.	d.
Confumed of the capital fund by In-Patients	252	0	1
Ditto - - - by Out-Patients	163	14	0

£415 14 1

K.

DOUBTS will naturally be conceived of the success of any Proposition which must *necessarily* depend on a general acquiescence of the Subscribers in an augmentation of the sum of their Subscription. If my reasoning has been distinctly understood, the *point* of a Proposition resulting from it would not *depend* on an increase of Subscription either in the Total, or relative to each Subscriber; it would require only that Subscribers would consent to *an increase of value of each right of recommending*; and as this Regulation produced a diminution or an increase of Income, the Wards would either be relieved from an unwholesome pressure of numbers of Patients, or Legacies and Benefactions (instead of being annually absorbed by Subscribers) would accumulate, so as to provide further accomodation adapted to the wants and disposition of the times.

It may be said, there are a number of Subscribers of One Guinea, in regard to whom this reasoning will not apply; for, by any similar Regulation, they must entirely renounce the gratification of participating in this good, and relieving their sick neighbours, or must consent to augment the sum of their Subscription;—this is true, but (speaking without disguise) it is *also* true that no person can apply a Guinea to a charitable purpose in this way, without injuring the fund, under the protection of which he subscribes.† Such

† At Manchester, no Person subscribing less than Two Guineas can recommend an In-Patient; but a Subscriber of One Guinea may recommend one Out and one Home Patient at a time.

Vide Manchester Rules, p. 11.

Such are the times in which we live, or, rather, such is the state of Man, that the purposes of Charity are not so limited as that the privation of any *one* object need interrupt the course of general Benevolence.

But even if medical relief must of necessity be the object of application; instructed by experience, I may observe, that there is no specific purpose to which small Subscriptions can be so usefully applied as in instituting medical Dispensaries, or in supporting those already instituted, in various parts of the County. Such Institutions cannot fail to be of *real* use and of *universal* application, whilst the power of recommending Out-Patients, attached to an Infirmary Subscription, in regard to three-fourths of the Subscribers, is an *useless* and *nugatory* privilege;—nay, more,—in regard to the interest of the Infirmary itself, I venture to suggest, that to apply small Subscriptions to such Institutions would be a most effectual, though indirect means, of giving it support.

The Stroud Dispensary is chiefly supported by the Subscribers of small sums; the amount of the whole annual Subscription has never exceeded 90*l.* and with no greater sum, applied by the eminent assistance of Dr. SNOWDEN, not less than 500 persons are relieved with advice and medicine. Had this Dispensary not existed, a great portion of these persons would have pressed for admission, as In-Patients of the Infirmary, under recommendations created by the charitable Guineas now applied in this direction.

But as the result of such a Proposition, I will suppose that the Subscribers, to whom an increase of sum subscribed would be disagreeable, would unite in forming new Dispensaries, or that they would individually support those already instituted; and, with regard to all other Subscribers, I will presume that not more than one-half would consent to
increase

increase their Subscription, so as to maintain their present Rights, whilst the remainder would rather consent to a diminution of their Rights with the *same* or a *diminished* Subscription; then, I say, that, tho' the positive Revenue would not be augmented, the relative Subscription would be improved, and the avowed purpose of the Committee obtained.

As for example;—the present Subscription of 939 Guineas constitutes that number of rights to recommend; by virtue of these 939 Rights, 457 Patients only were admitted in the year; to these add 132 Patients on the Establishment, the amount is 589, the number actually admitted; and the average of Patients in the House, on this number, is proved, by fact, to be 110.

Reasoning by analogy:—If Five Shillings were added to the cost of each Right of Recommendation; the *same* sum subscribed would establish 758 Recommendations, and so many Rights would annually send 369 Patients; which number, added to 132 on the Establishment, would make a Total of 501; the average numbers on the Diet List would then be 93.—But if Nine Shillings were added for each Right of Recommendation, the *same* sum subscribed would establish 657 Rights, and these would send 318 Patients; which, added to the 132 Patients on the Establishment, would form an annual Total of 450, and the average number on the Diet List would be 84; a number, for which, there can be no doubt, the most healthful accommodation might be provided. I certainly conceive it to be a more probable effect of such a Regulation that the money Subscription would be increased; but I flatter myself it is proved, that, *in either event, the foundation of the Institution would be secured*; and as circumstances should hereafter vary, the price of recommendation might again be altered.

FINIS.
